

# BEST AVAILABLE COPY

POSITION	ID NO.	DATE
CLASSIFIER	10	10-30-95
EXAMINER	115	11-14
TYPIST	5202	4/5
VERIFIER	540	4-18-96
CORPS CORR.		
SPEC. HAND		
FILE MAINT.	529	11/15/95
DRAFTING		

## INDEX OF CLAIMS

Claim	Final	Original	Date
1			2-15-97
2			2-15-97
3			2-15-97
4			2-15-97
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50			2-15-97

SYMBOLS

- ✓ Rejected
- Allowed
- (Through number) Canceled
- Restricted
- Non-elected
- Interference
- Appeal
- Objected

Claim	Final	Original	Date
51			2-15-97
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99			2-15-97
100			2-15-97

# BEST AVAILABLE COPY

## INDEX OF CLAIMS

Claim		Date						
Final	Original							
	101	2-1-76	2-13-77	2-1-77	8-13-78	10-29-79	6-25-81	2-3-82
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SYMBOLS

- ✓ ..... Rejected
- ..... Allowed
- (Through numeral) Canceled
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- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

Claim		Date						
Final	Original							
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